

Editor's pick

As physicians, we are privileged to have access to people's private lives—their joys and sorrows, their secrets, their indiscretions, and their worries. This part of the medical profession's covenant with society is at the core of what makes medicine a “profession” distinct from, say, plumbers or store clerks. Asking for such information has even become a vital part of our clinical training. We learn how to explain to patients our need to ask about sensitive topics. Such inquiry, we tell them, is part of our attempt to understand who they are as people and to allow us to place their health in its proper context. We ask questions that strangers would never ask of another—questions about sexual practices, substance abuse, intimate relationships, and risky behaviors.

In this issue of *wjm* (p 148), Chaffee and Faria look at the epidemic of firearm deaths. About 30,000 deaths per year in the United States are due to firearms, which is about the same number as deaths from breast or prostate cancer. Most health professional groups encourage physicians to inquire about guns as part of the routine history. We pose this question in much the same way that we ask patients about immunizations, if they wear seat belts or bike helmets, or whether they are using condoms. All questions are intended to act as screening items that can lead to further discussion if needed. But Faria sees questions about guns as contrary to our duty as physicians and, in fact, argues that doctors have become “agents of the State.”

What is our duty to the unborn, the dead, and the

preserved? This month, we feature a series of photographs of congenital malformations preserved in formalin, dating from the late 1880s to the 1960s, by noted photographer Camille Solyagua (p 174). Beyond just a scientific record, do these preservations serve a broader social purpose? These images raise all sorts of questions about our definitions of normality, our acceptance of difference, and our rights to access people's personal tragedies. While in many ways they are shocking and upsetting, Solyagua urges us to look at them “with openness, compassion, and a sincere willingness to understand what they represent” (p 174).

We publish the photographs alongside a series of essays that may help to guide us in our own personal responses to the images. Needleman, a philosopher, reminds us that the specimens are not just “cases,” but are “people who tried and failed to become people” (p 182). Perhaps they reflect our own sorrows and failings. Sobieszek, an art historian, says that the images move us to consider “what it is to be human, healthy, and alive” (p 178). In looking at the pictures, Glass, an ethicist at a children's hospital, was overwhelmed with sadness, and now “feels shame in collaborating with the continued voyeurism in displaying these images for public view” (p 180).

What do you think? We have started a dialogue, and we would like your opinions. Please visit our home page (www.ewjm.com) and tell us what you think. We will publish the best responses on our website, and in a future issue of *wjm*.